File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319

Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

2008 MAY 16 AM 9: 50

COMMITTEE NAME (Must be same as on Statement of C	rganization)].	
Mayne County Democratic	ntral Committee	FORM	
(1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Ca	or: [4] (2) State PAC (3) State Party	DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue	ool Board or Other Political Subdivision PAC (For Office Use	
CANDIDATE COMMITTEES ONLY:		Comm. #	
Candidate Name	Political Party (if applicable)	1 3	
Office Sought	District (if Senate or House)		
Late reports are subject to possible civil and criminal penalties. and the chairperson, for any other type of committee, is the individual formula of the chairperson for any other type of committee, is the individual formula of the chairperson for any other type of committee, is the individual formula of the chairperson for any other type of the chairperson for any other type of the chairperson for any other type of committee, is the individual formula of the chairperson for any other type of committee, is the individual formula of the chairperson for any other type of committee, is the individual formula of the chairperson for any other type of committee, is the individual formula of the chairperson for any other type of committee, is the individual formula of the chairperson for any other type of committee, is the individual formula of the chairperson for any other type of committee, is the individual formula of the chairperson for any other type of committee, is the individual formula of the chairperson for any other type of committee of the chairperson for any other type of committee of the chairperson for any other type of committee of the chairperson for any other type of committee of the chairperson for any other type of	Pursuant to lowa Code section 68B.32A(7) th vidual responsible for filing timely and accurate 641-872-1206 TELEPHONE	te reports.	
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	DATE	SIGNED
I AM FILING A Jan. 1 through May 14, 2. (report date)	indicate by # [1	NON-ELECTION Y	EAR.
CHECK IF AMENDMENT TO REPORT DATED	Loca	l Committees, enter D	ate of Election
Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is file	ad)	nty & Local Committee h Election is held	s, enter County in
STATEMENT OF CASH ON HAM	ND		
CASH ON HAND at the beginning of the reporting period. (1 committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	e cash on hand at the end	s 1,8	247,21
ADD TOTAL MONEY TAKEN IN THIS PERIOD	·		47.21 one
Schedule A: Cash Contributions total (Attach Sche	dule A) (*also see in-kind below)	N	one
Schedule F: Loans Received total (Attach Schedul	e F)		
Schedule H: Total Sales of Campaign Property (At	tach Schedule H)	•••	
(Schedule H applies to Candidates' Con	nmittees Only)		
	SUB-TOTAL	\$ 1.8	47.21
SUBTRACT TOTAL MONEY SPENT THIS PERIO	D		47.21 08,83
Schedule B: Expenditures total (Attach Schedule E	3) (**also see debts and loans below)	6	08,83
Schedule F: Loan Repayments total (Attach Sched	lule F)		-
CASH ON HAND at the end of this reporting period (if final re	eport balance must be zero)	\$ 1,2.	38,38
**UNPAID BILLS (From Schedule D - Attach Schedule D)		¢	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sch			
**OUTSTANDING LOANS (From Schedule F - Attach Sched			
CONSULTANT BREAKDOWN (Schedule G Attached?)	. ,	• YES	NO
CANDIDATE COMMITTEES ONLY:		1E9	NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Att	tach Schedule H)	\$	·
STATE COMMITTEES: Submit a reconciled campaign acco	,	*	
odnimi i odnimi a recononed campaign acco	and paint preferrent in partially of each yea	I.	

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Wayne County Democratic Central Committee		CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	ID#				INCOME
	CK#			\$	
· · · · · · · · · · · · · · · · · · ·	ID#				
	CK#				1
	ID#				
	СК#	7			
	ID#	/ / A			
	СК#				
	ID#				
	СК#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#	*			
	CK#				
			SUB-TOTAL		

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page ____ of ____

TOTAL (if last page of this schedule)

SCHEDULE

MONETARY

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME	/Advice ha		- 04-4- /	
OCIVITAL I EE RAIVIE	IWIIISI DA	Same as o	n Statomont	At ()manni-nti-n1

Hayne County Democratic Central Committee

		Comme Comme	ile	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/3/08	ID# CK# 772	Vayne Co. Newspapers, Inc 205 H. Jackson PSB of 258 Conydon, In 50060	Duo Caucus ada run in New Era + Nines Republica. \$ 10 \$48	\$ 58.00
1/5/08	ID# CK# 773	The Seymour Herald 116 n. 4th St. Seymour, Ja. 52590	Two Caucus ads	64.00
1/7/08	ID# CK# 774	U.S. Post Office 215 H. State Conydon, Ja. 50060	Fifty 2-Cent stamps	1.00
1/7/08	ID# CK# 775	Pamida 105 E. Juckson Conydon, Sa. 50060	Two reams copy paper	8.54
1/8/08	ID# CK# 776	Nollar General Stone 106 S. Franklin Congdon, Sa 50060	Two bopes of # 10 business envelopes	2.14
1/18/08	ID# auto- matic CK#with- drawal	Cosydon State Bank 201 M. Jackson St. Cosydon, Ja. 50060	Bot of replacement Checks	8.35
46/08	ID# CK# 777	Name Co. Newspapers Inc. 205 H. Jackson Conydon, Sa. 50060	Two caucus ade run in New Era x T-R \$ 10 \$ 418	58,00
2/7/08	ID# CK# 778	Dollar General Store 106 M. Franklin Conydon, In 50060	Duo bopes of \$ 10 business envelopes	2.14
		U	SUB-TOTAL	8 0 17

SUB-TOTA

202.17

TOTAL (if last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount; purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

	i		
Page	1	of	2
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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

	CANDIDATE	NAME AND ADDRESS TO WHOM	D 1700	
DATE	ID NUMBER	EXPENDITURE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT
EXPENDED (MM/DD/YR)	(if applicable) AND PAC	(Disbursement) WAS MADE	(======================================	EXPENDED
(IVIIVII BO/ 114)	CHECK			
	NUMBER			
2/-/-	ID#	Samida	Two reams copy paper	
2/7/08	ск# <i>779</i>	105 & Jackson	the copy pages	4 40
	CK# // 9	Conydon, Ja 50060	plus I box staples	\$ 7,73
	ID#	U.S. Post Office	D+ + = : 1 A +=	
2/7/08	706	215 % State	Postage to mail County Convention info todelegates	<u> </u>
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ск# 7 <i>80</i>	Conydon, Sa 50060	Convention info tidelegales	50,53
	ID#		Air tini F Ti	
4/9/08		Lows Democratic Farty	Dive registrations to	
119100	CK# 78/	5661 Flew Dr.	State Dem. Convention	175.00
		Des Moines, Ja 503	@ \$ 35 lach	j
1//	ID#	Second District Convention 40 D. D. Aunold n. E. 1483 Council St. n. E.	Que reinstrations to	
4/9/08	ск# 782	1403 Oldersold n.E.	Dive registrations to and District Convention	125.00
	J , J.	Cedar Rapids, Ja-52402	@ \$25 each	720.00
.17 1	ID#	Wayne Co. Dais Board	Paramal of advertising	
4/29/08	CK# 783	P.O. Box 167	Renewal of advertising sign at the Fair.	40.00
	CK# / 83	Conydon, la 50060	sign at the tace.	
	ID#	U.S. Post Office	Book of the t	
5/12/08	50.1	215 H. State	Book of 20 stamps @ 42¢	8.40
	CK# 784	Conydon, Ja. 50060	727	8.70
	ID#	conjuen, c. co	7	
	CK#			
	ID#			
	CK#	•		

SUB-TOTAL

TOTAL (if last page of this schedule)

\$406.66 \$608.83

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